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IN

2879

FACSIMILE COVER SHEET

TO:	EXAMINER GLEN ZIMMERMAN		
FROM:	Frank A. DeLucia		
RE:	Appln. No. 09/749,727 CFG 02738 U.S.		
FAX NO.:	703-308-7382		
DATE:	October 14, 2003	NO. OF PAGES: <small>(including cover page)</small>	26
TIME:	05:56:00 002738	SENT BY:	

MESSAGE

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In re Application of:

Docket No. 03560.002738.

YOICHI ANDO

Application No.: 09/749,727

Examiner: G. Zimmerman

Filed: December 28, 2000

Group Art Unit: 2879

For: IMAGE FORMING APPARATUS

Date: October 14, 2003

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☐ No additional fee is required.


The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	163	MINUS	162	= 1	x \$9 \$18	18
INDEP. CLAIMS	8	MINUS	7	= 1	x \$43 \$86	86
Fee for Multiple Dependent claims \$145*/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☒ Charge \$ 104.00 to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
Registration No. 42476

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Form #120

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Amendment Under 37 C.F.R. § 1.116
Group Art Unit 2879, Expedited Procedure

03560.002738

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	Examiner: G. Zimmerman
YOICHI ANDO)	Group Art Unit: 2879
Application No.: 09/749,727)	
Filed: December 28, 2000)	
For: IMAGE FORMING APPARATUS)	October 14, 2003

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Alexandria, VA 22313-1450

AMENDMENT

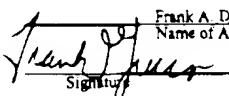
Sir:

In response to the Office Action of August 7, 2003, please amend the above identified application as follows.

The claims are listed beginning at page 2. The Remarks begin at page 19.

I hereby certify that this correspondence is being transmitted by facsimile to the United States Patent and Trademark office (Fax No. 703-308-7382) on

October 14, 2003
Date of Transmittal

	Frank A. DeLucia (Reg. No. 42,476) Name of Attorney for Applicant
Signature	October 14, 2003 Date of Signature

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